

Rural District of Great Ouseburn.

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Dr. C. E. Lownds' Annual Report

Of the Sanitary Condition of the Rural District Council of
Great Ouseburn, for the Year 1907.

MR. CHAIRMAN AND GENTLEMEN,

I beg to submit to you my Report for the year ended December 31st, 1907.

BIRTH RATE.—259 Births have been registered during the year, giving a birth rate of 27.06, a considerable increase on last year when there were 236 births registered, giving a birth rate of 24.6. The birth rate for England and Wales for the year 1907 was 26.3.

DEATH RATE.—123 deaths were registered during the year (69 males and 54 females), giving a death rate of 12.8 per 1,000. This is below the average for the last ten years, viz. 14.3, and also below the death rate for England and Wales which is 15.0 per 1,000.

Seventeen deaths of infants under one year of age were registered. This infantile mortality is represented by a ratio of 65 deaths of infants under one year of age to 1,000 registered births, being 50 below the average of the last ten years. The rate for England and Wales for the same period was 118.

The chief causes of death under 1 year of age were : Tubercular Disease 2, Pneumonia 2, Premature Births 5, Measles 1, Enteritis 1. Of the deaths between 1 and 5 years of age the principal causes were : Tubercular Disease 3, Pneumonia 3. Between 5 and 15, 2 deaths were ascribed to Diphtheria, 1 to Tuberclse and 1 to Pneumonia. Between 15 and 25, 2 were due to Phthisis and 1 to Pleurisy. Above 25 and under 65, 4 deaths occurred from Phthisis, 6 from Cancer, 3 from Pneumonia, 2 from Confinements and 2 Suicide. Above 65, 4 were due to Cancer, 5 to Bronchitis, 5 Pneumonia and 11 Heart Disease.

The number of deaths from Zymotic Disease was 4, Measles 2, and Diphtheria 2.

SCARLET FEVER.—12 cases were notified during the year as against 19 in 1906. All of these cases were removed to hospital, 3 being from one home in Branton. Nearly all the cases were isolated ones, and I consider that prompt removal to hospital tended to prevent the spread of the disease.

DIPHTHERIA.—19 cases were notified, of these 15 were removed to hospital. 2 deaths occurred, one in a private home and the other in hospital, this child being practically in a dying condition when taken into the hospital. As a rule the illnesses were of a mild type. The majority of the cases came from Acomb in which district an epidemic broke out in March and continued until May. I was of opinion that the probable cause of the outbreak was the unsanitary condition of the Privies, due to the scavenger neglecting to do his work properly. On account of this outbreak the Board School at Acomb was closed for a fortnight. During this period the school drains were thoroughly tested and found to be in good order.

ENTERIC FEVER.—The steady decline of this disease was still continued, and during the year 1907 no case was notified. During the last 3 years only 2 cases of Enteric Fever have occurred in our district, which will compare favourably with any other district in England.

The Isolation Hospital has again proved its utility, 46 cases having been admitted during the year. Of these 46 cases 29 were Scarlet Fever and Diphtheria 17. Of the 29 Scarlet Fever cases 17 were from Bishopthorpe and 12 from our own Union. Of these 12 cases 2 were from Acomb, 1 from Aldborough, 3 from Branton, 1 Great Ouseburn, 1 Little Ouseburn, 1 High Dunsforth, 2 Boroughbridge, and 1 from Rufforth. Of the 17 Diphtheria cases 12 were from Acomb, and 5 from Bishopthorpe.

PHTHISIS AND TUBERCULAR DISEASES.—13 deaths occurred during the year 6 from Phthisis and 7 from other forms of Tubercl. Although the death rate from all other forms of infectious disease is on the decline, that from consumptive disease goes on unchecked and year after year we get more deaths from Tubercl than all other forms of infectious disease put together. Perhaps if Phthisis were scheduled as a notifiable infectious disease something might be done, by advising as to proper isolation, ventilating of rooms, provision of proper sanitary conditions generally and thorough disinfection of rooms, all bedding, &c., after removal or death of a Phthisical patient.

MEASLES AND WHOOPING COUGH.—We have been very free from these diseases during the past year.

We are again indebted to the Public Health Laboratory at Wakefield where 79 specimens have been examined for us free of charge, viz.:—Serum 2, Sputum 9, Diphtheria 68.

WATER SUPPLY.—During the latter months of the year a thorough enquiry into the water supply of the district has been made by Dr. Kaye (County Medical Officer of Health). I went round most of the district with Dr. Kaye, and was present when a great number of the samples were taken. I consider that the samples taken and analysed give a fair indication of the condition of the water supply throughout the Union (excepting Acomb). 134 samples were taken in all, not from wells that from their position appeared to be peculiarly liable to pollution, but rather from those wells that were chiefly used by the inhabitants of the various villages for their supply. By now you will have read Dr. Kaye's Report, so I need not enter minutely into these various analyses. You will notice that out of the 134 samples analysed only about 40 are marked as being actually Pure, others being classified as fair, passable, &c., whilst 34 are condemned as being totally unfit for drinking purposes. Many others are mentioned as being suspicious, slightly polluted, &c.

The result of this enquiry shews in my opinion that the water supply of our district is not only inadequate in quantity but unsatisfactory in quality, and I feel sure that this is a matter that needs your very careful consideration. I need not dwell on the advantage of having an abundant supply of pure water which can be drawn from a tap at the very door, or better still in the house, conducing to cleanliness of person, cleanliness of the house and of the parish generally, for cleanliness is of great importance in maintaining health and vigour. In a rural district like this it is also important that Dairies and Dairy Farms

should be furnished with an abundant supply of pure water. So far no epidemic of disease has broken out in this district directly attributable to drinking polluted water, but where you have sewage entering the wells as in many villages in the district, we are always liable to epidemics of such diseases as Enteric Fever, Diarrhoea, &c., and is it wise to wait until we get such an outbreak before providing a proper and abundant water supply. As to a scheme for supplying the Union this is a difficult question and will need careful consideration and enquiry, and I should strongly advise you to call in a good practical water Engineer to help you with his advice. No doubt a scheme for supplying the whole district (except Acomb which is supplied by York) will be expensive taking into consideration the distance the villages are apart and the long length of mains that would be required, but I think in the long run would be much the most satisfactory, fortunately we have a spring in the district giving a large supply of good water which might be utilized. The only other way I can see would be to deal with each village separately either in shape of some small scheme or by means of bore wells, this has been done at Poppleton and Aldborough and in these villages answers fairly well. One objection to the accumulation of bore wells is that by boring fresh wells you are apt to interfere with existing supplies, for instance when we bored deeper at Great Ouseburn Workhouse we took away the supply from Grassgills Cottages. The same I believe to have occurred with regard to the Inebriate's Home at Cattal and Whixley Village. Another objection to one or two wells for the supply of a village is the distance the water has to be carried, so that not more water is used than is absolutely necessary, also no benefit is derived in the matter of flushing drains and sewers, a very important thing in warm weather.

COWSHEDS AND DAIRIES.—Dr. Kaye goes very carefully in his Report into the condition of the Cowsheds in the district, many of these were found to be dirty and ill ventilated. It is most important that milk should be kept clean and as free from germs as possible and this cannot be possible in dirty, badly ventilated and ill lighted byres.

“HOUSING OF THE WORKING CLASSES.”—With the exception of the village of Hunsingore, where many of the cottages have been improved and enlarged, little or nothing has been done to improve the condition of the cottages in the Union. In our recent survey we found many cottages practically unfit for habitation, being dilapidated, damp, and without sufficient ventilation. Most of these cottages would have been condemned before now if we had not recognised the difficulty the occupiers would have in finding other homes. Very little building is going on in the district except Acomb and Poppleton where several new houses, principally of the villa type have been erected.

SEWAGE AND SEWERAGE DISPOSAL.—A scheme for disposal of sewage at Kirk Hammerton has been carried out during the past year and so far the results appear to be satisfactory. A Local Government Board Enquiry was held during the year at Great Ouseburn, to examine into the condition of the Great Ouseburn Sewage Disposal Works. As a result of that enquiry it has been decided to lessen the size of the existing tanks which have been found to be much too large to deal with the small amount of sewage entering them.

At Green Hammerton there is need for an efficient system of sewerage, the main sewer being partly rubble, partly land tiles, and also sanitary pipes with clay joints. This work ought not to be delayed much longer.

At Whixley it is proposed to deal with the sewage in the same way as we have dealt with the sewage of Poppleton and other places, i.e., by means of a settling tank and irrigation on land. We have usually found this to work satisfactorily and do away with the pollution of the stream. There are many sanitary defects pointed out in Dr. Kaye's Report. Some of these have already been dealt with and many others will be remedied during the year.

C. E. LOWNDS,

Medical Officer of Health.

Appended is the Report of Inspector of Nuisances.

24 New Houses erected during the year, principally better class houses in neighbourhood of Acomb and Poppleton.

Nuisances dealt with during the year :—

Sewers re-laid	1
Houses and Premises re-drained	6
Privies and Ashpits new or re-constructed ..	8
Water Closets new	3
Other Nuisances abated	41
 Total	 59

C. CAWOOD,
Inspector.

TABLE I.

Rural District of Great Ouseburn.

Vital Statistics of Whole District during 1907 and Previous Years.

YEAR.	Population estimated to middle of each year.	BIRTHS.		TOTAL DEATHS REGISTERED IN THE DISTRICT.				TOTAL DEATHS IN PUBLIC INSTITUTIONS IN THE DISTRICT	Deaths of Non-residents registered in Public Institutions in the District.	Deaths of Residents registered in Public Institutions beyond the District.	NETT DEATHS AT ALL AGES BELONGING TO THE DISTRICT				
				Under 1 year of age		At all ages.									
		Number.	Rate.*	Number.	Rate per 1,000 Births registered	Number.	Rate.*				Number.	Rate.*			
1.	2.	3.	4.	5.	6.	7.	8.	9.	10.	11.	12.	13.			
1897	9,149	242	25.6	28	115	135	14.3	6			135	14.3			
1898	„	254	26.2	28	114	158	16.5	5			158	16.5			
1899	„	240	25.4	21	087	125	13.05	4			125	13.5			
1900	„	231	24.5	42	190	168	16.9	7			168	16.9			
1901	„	238	25.2	27	113	143	15	8			143	15			
1902	9,573	240	25.07	16	66	138	14.3	4			142	14.8			
1903	„	226	23.6	21	92	121	12.6	7			125	13.05			
1904	„	241	23	33	137	127	13.2	10			133	13.9			
1905	„	225	23.5	32	142	135	14.1	11			140	14.6			
1906	„	236	24.6	23	97	122	12.7	11			130	13			
Averages for years 1897-1906	9,361	236	24.7	27	115	137	14.3	7			149	14.4			
1907	9,573	259	27.06	17	65	123	12.8	4			131	13.6			

* Rates in Columns 4, 8, and 13 calculated per 1,000 of estimated population.

NOTE.—The deaths to be included in Column 7 of this table are the whole of those registered during the year as having actually occurred within the district or division. The deaths to be included in column 12 are the number in column 7 corrected by the subtraction of the number in column 10, and the addition of the number in column 11.

By the term "Non-residents" is meant persons brought into the district on account of sickness or infirmity, and dying in public institutions there; and by the term "Residents" is meant persons who have been taken out of the district on account of sickness or infirmity and have died in public institutions elsewhere.

The "Public Institutions" to be taken into account for the purposes of these tables are those into which persons are habitually received on account of sickness or infirmity, such as hospitals, workhouses, and lunatic asylums.

Area of District in acres
(exclusive of area covered by water). } 45,970.

Total Population at all ages, 9573.

Number of inhabited houses, 2143.

Average number of persons per house, 4.47.

At Census of 1901.

TABLE II.

Rural District of Great Ouseburn.

Vital Statistics of separate Localities in 1907 and Previous Years.

TABLE III.

Rural District of Great Ouseburn. Cases of Infectious Disease notified during the Year 1907.

NOTIFIABLE DISEASE.	At all Ages.	CASES NOTIFIED IN WHOLE DISTRICT.					No. of Cases removed to Hospital from each Locality.		
		At Ages—Years.		TOTAL CASES NOTIFIED IN EACH LOCALITY.			Acomb.	Borough-bridge.	Rest of District.
		Under 1.	1 to 5.	5 to 15.	15 to 25.	25 to 65.			
Small-pox								
Cholera								
Diphtheria								
Membranous Croup ..									
Erysipelas								
Scarlet Fever								
Typhus Fever								
Enteric Fever								
Relapsing Fever								
Continued Fever								
Puerperal Fever								
Plague								
Totals

TABLE IV.

Rural District of Great Ouseburn. Causes of, and Ages at, Death during the Year 1907.

CAUSES OF DEATH.	DEATHS AT THE SUBJOINED AGES OF "RESIDENTS" WHETHER OCCURRING IN OR BEYOND THE DISTRICT.							DEATHS AT ALL AGES OF "RESIDENTS" BELONGING TO LOCALITIES, WHETHER OCCURRING IN OR BEYOND THE DISTRICT.			Total Deaths whether Residents or "Non-Residents" in Public Institutions in the District. 12.	
	All Ages. 2.	Under 1 year. 3.	1 and under 5. 4.	5 and under 15. 5.	15 and under 25. 6.	25 and under 65. 7.	65 and upwards. 8.	Acomb. 9.	Borough-bridge. 10.	Rest of District. 11.		
	1. 1.	2.	3.	4.	5.	6.	7.	8.	9.	10.	11.	
Small-pox ..												
Measles ..	2	1	1						2			
Scarlet Fever ..												
Whooping-cough ..												
Diphtheria and Membranous Croup ..	2				2						1	1
Croup ..												
Fever { Typhus ..												
Fever { Enteric ..												
Fever { other continued ..												
Epidemic Influenza ..												
Cholera ..												
Plague ..												
Diarrhoea ..	1					1						1
Enteritis ..	1	1										1
Puerperal Fever ..												
Erysipelas ..												
Other Septic Diseases												
Phthisis (Pulmonary Tuberculosis) ..	7					2	5		3	1	3	
Other Tubercular Diseases ..	7	2	3	1		1			2	2	3	
Cancer, Malignant Disease ..	11						7	4	2	1	8	1
Bronchitis ..	7						1	6	1		6	
Pneumonia ..	14	2	3	1		3	5	3	1		10	
Pleurisy ..	1				1							1
Other Diseases of Respiratory Organs	2						1	1			2	
Alcoholism } ..	1						1		1			
Cirrhosis of Liver } ..												
Venereal Diseases ..												
Premature Birth ..	5	5							2		3	
Diseases and Accidents of Parturition ..	3				1	2					3	
Heart Diseases ..	14	1				2	11	1	1		12	
Accidents ..	3	1	1			1			1		2	
Suicides ..	3					2	1	1			2	
All other causes ..	47	4	4	3	2	15	19	17	6	24	3	
All causes ..	131	17	12	7	7	41	47	37	12	82	4	

TABLE V.

Rural District of Great Ouseburn. Infantile Mortality during the Year 1907.

Deaths from stated causes in Weeks and Months under One Year of Age.

CAUSE OF DEATH.	Under 1 Week.	1-2 Weeks.	2-3 Weeks.	3-4 Weeks.	Total under 1 Month.	1-2 Months.	2-3 Months.	3-4 Months.	4-5 Months.	5-6 Months.	6-7 Months.	7-8 Months.	8-9 Months.	9-10 Months.	10-11 Months.	11-12 Months.	Total Deaths under One Year.
ALL CAUSES.	Certified ..	..	6	1	7	1	2	2							2	2	16
	Un-certified ..	..					1										1
Common Infectious Diseases.	Small-pox ..	.															
	Chicken-pox ..																
Diarrhoeal Diseases.	Measles ..														1		1
	Scarlet Fever ..																
Wasting Diseases.	Diphtheria : Croup ..																
	Whooping Cough ..																
Tuberculous Diseases.	Diarrhoea, all forms																
	Enteritis : Muco-enteritis, Gastro-enteritis ..													1			1
Other Causes.	Gastritis, Gastro-intestinal Catarrh ..																
	Premature Birth ..	4	1														5
	Congenital Defects ..																
	Injury at Birth ..																
	Want of Breast Milk, Starvation ..																
	Atrophy, Debility, Marasmus ..													1			3
	Tuberculosis ..																
	Meningitis ..																
	Tuberculous Peritonitis ..																
	Tabes Mesenterica ..																
	Other Tuberculous Diseases ..																
	Erysipelas ..																
	Syphilis ..																
	Rickets ..																
	Menengitis (not Tuberculous) ..																
	Convulsions ..																
	Bronchitis ..																
	Laryngitis ..																
	Pneumonia ..													1			2
	Suffocation, overlaying ..	1															1
	Other Causes ..	1												1		2	4
		6	1			7	1	3	2						2	2	17

BIRTHS IN THE YEAR } Legitimate, 249.
} Illegitimate, 10.DEATHS IN THE YEAR OF } Legitimate infants, 17.
} Illegitimate infants, —

POPULATION estimated to middle of 1907, 9,573.

DEATHS FROM ALL CAUSES AT ALL AGES, 123.

